PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number

10/540976

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | SMALL ENTITY TYPE | | OR | OTHER THAN OR SMALL ENTITY | |
|---|--|---|--|--------------------------------|---------------------|-------------------------------|-------------------|------------------------|-----|----------------------------|------------------------|
| U.S. NATIONAL STAGE FEES | | | | | | | RATE | FEE | | RATE | FEE |
| BASIC FEE | | | SMALL ENT. | = \$ 150 | LARG | SE ENT. = \$ 300 | BASIC FEE | | OR | BASIC FEE | 300 |
| EXAMINATION FEE | | | Satisfies PCT Ar (4) = \$50 | | | her situations = 100 / \$ 200 | EXAM. FEE | | 1 - | EXAM. FEE | 20) |
| SEARCH FEE | | | U.S. is ISA = \$ ALL other cou \$ 200 / \$ | ntries = | | her situations = 250 / \$ 500 | SEARCH FEE | | | SEARCH FEE | 300 |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | | / 50 ≐ | X \$ 125 = | | | X \$ 250 = | |
| TOTAL CHARGEABLE CLAIMS | | | ominus 20 = | | • | | X \$ 25 = | | OR | X \$ 50 = | 1 |
| INDI | EPENDENT CL | AIMS | 2 m | inus 3 = | • | | X \$ 100 = | | OR | X \$ 200 = | |
| MUL | TIPLE DEPENI | DENT CLAIM PRI | ESENT | | | | + \$ 180 = | | OR | + \$ 360 = | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | TOTAL | | OR | TOTÀL | |
| 8 (G) (Column 1) (Column 2) (Column 3) | | | | | | (Column 3) | SMALL ENTITY | | OR | OTHER THAN SMALL ENTITY | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | • | RATE | ADDI- TIONAL FEE |
| | Total | • 15 | Minus | ·· 2 | 9 | = - | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | • [| Minus | 3 | | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | · | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | | | | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | |
| AMENDMENT B | , | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUMI PREVIO PAID | EST BER OUSLY | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | ' | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | ** | | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent- | • | Minus | *** | | 5 | X \$ 100 = | · | OR | X \$ 200 = | |
| | FIRST PRES | ENTATION OF M | IULTIPLE DEPE | NDENT (| CLAIM | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. | | | | | |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3. The "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | |